

STUDENT AGREEMENT PARENT PERMISSION FORM

What: UP School of Nursing Career Day Date: November 7, 2019
Check-in time: 8:45 am Start/End time: 9 - 11:30 am

Meeting location: 5000 N Willamette Blvd, Portland, OR

Registration closes: When filled. Seats fill fast! Send a registration form and await confirmation

Transportation: Students are responsible for their own transportation.

Parkrose: We will try to provide transportation to a MAX station when possible; check with your

College & Career Center. Tri-Met passes are always available in the Main Office.

Dress nicely. Business casual attire is great -- use your best judgement. No shorts, sweat pants,

What to wear: crop tops, hats, t-shirts with objectionable logos/graphics or gum.

Absences: Students are responsible for arranging with teachers to make up work for excused absences.

Parkrose: If classroom activity is not available for makeup, an alternate assignment will be arranged with teacher. Students have the day missed plus one day to complete make-up work.

For moreVisit <u>www.portlandworkforcealliance.org/events</u> for more information. **Students** should direct questions to the College & Career Center.

School Contacts should direct guestions to PWA staff (career@portlandworkforcealliance.org)

By signing below the student and parent/guardian acknowledge the following:

- The student will attend and participate fully in activities and the entire program.
- The student will not be allowed to leave the premises or leave early, attendance will be taken periodically.
- The student agrees to conduct him/herself appropriately as representatives of his/her school.
- The student agrees to show respect for PWA and event staff, school personnel, and other students.
- The student will dress appropriately for the event. (See "What to wear" above.)
- The parent/guardian gives permission for the student's picture or video to be taken at the event and for those photos or recordings to be used for promotional and educational purposes.
- The parent/guardian permits the student's name to be on participant roster distributed to school contacts.
- Portland Workforce Alliance and other involved companies and school districts (named above) have no liability for this
 activity. Each participant is responsible for his/her own safety and agrees not to look to PWA or other involved parties with
 regard to liability for any claims related to participation in activities at the event.
- The student will abide by employer non-disclosure policies, such as restrictions on taking photographs or sharing any
 proprietary information.

STUDENT		
Student Name (Print):	School:	
Grade: □9 □10 □11 □12	Best way to reach you: □ Cell phone □ Email	
Cell phone:	Email (Print clearly):	
Student signature:		Date:
PARENT/GUARDIAN PERMISSION		
Parent/Guardian Name (Print):	Day phone:	
Parent/Guardian signature:		Date:
SCHOOL CONTACT ENDORSEMENT		
School Contact Name (Print):	School job title:	
Day phone:	Email (Print clearly):	
School contact signature:		Date: